PATENT APPLICATION FEE DETERMINATION RECO													
		Effect	ive Janua	ary-1,-20	003					062	38	RSI	- 1
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			10					RAT	E	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			$/\mathcal{O}_{\text{minus 20=}}$		* ~			X\$ 9)=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* /			X42=			OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		,	OR	+280=	
* If	the difference	in column 1 is	less than z	ero, enter	"0" in c	"0" in column 2			AL		OR	TOTAL	4,17)
CLAIMS AS AMENDED - PART II									-		10.,	OTHER	THAN
(Column 1)				(Colur		(Column 3)		SMA	LL I	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9)=		OR	X\$18=	
	Independent	*	Minus	***		=		X42	=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEPENDENT CLAIM				j	+140	,_		<u> </u>	+280=	
a									TAL		OR	TOTAL	<u>-</u>
		(Column 1)		/Colum	mm 0\	(Calumn a)		addit. I	FEE		OR	ADDIT. FEE	
AMENDMENT B		CLAIMS		(Colur	EST	(Column 3)	1			ADDI-	1		ADDI-
		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RAT	E	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9)=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	CLAIM	=		X42	=		OR	X84=	
<u> </u>	FIRST PRESE	INTATION OF IM	ULTIPLE DE	PENDENI	CLAIM		J	+140)=		OR	+280=	
								TO ADDIT. I	TAL		OR	TOTAL ADDIT. FEE	
1		(Column 1)		(Colur	mn 2)	(Column 3)		ADDI1. 1				ADDII. FELI	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUŞLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=		X42	_			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR		
+140= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Nur	nber Previously Pa	id For" (Total o	or Independ	ent) is the	highest numb	er fo	und in th	e apı	oropriate bo	x in co	lumn 1.	